

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	JMM/H		10-08-14-01
O.I.P.E. CLASSIFIER			10-26-17
FORMALITY REVIEW	MH	920	03-13-01
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 □ ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
Final	10-08-14-01
Original	10-08-14-01
1	10-08-14-01
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5	10-08-14-01
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Claim	Date
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If more than 150 claims or 10 actions  
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